02/10

JAN 3 0 2009

PTO/SB/30 (09-04) Approved for use through 07/31/2006, OMB 0651-0031

Under the Paparwork Reduction Act of 1995, no persons are requir	U.S. Petent and Trade red to respond to a collection of informa-	emark Office; U.S. DEPARTMENT OF COMMERCE ation unless it contains a valid OMB control number.
Request for	Application Number	10/517730
Continued Examination (RCE)	Filing Date	08/DEC/2004
Transmittal	First Named Inventor	BLACKWOOD
Address to: Mail Stop RCE	Art Unit	1796
Commissioner for Patents P.O. Box 1450	Examiner Name	OJURONGBE, Olatunde S.
Alexandria, VA 22313-1450	Attorney Docket Number	OC5018PCT1
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.  Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.  1. Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and		
amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).		
a. Previously submitted. If a final Office action is outstanding, any amendments filed efter the final Office action may be considered as a submission even if this box is not checked.		
Consider the arguments in the Appeal Brief or Reply Brief previously filed on  Other  Other		
b. 🗸 Enclosed		
I. 🗸 Алтепфителt/Reply iii. 🔲 Information Disclosure Statement (IDS)		
ii, Affidavit(s)/ Declaration(s) Iv. Other		
2. Miscellaneous  Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period ofmonths. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)  b. Other		
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 04-1520 . I have enclosed a duplicate copy of this sheet.		
i. RCE fee required under 37 CFR 1.17(e)		
II. Extension of time fee (37 CFR 1.136 and 1.17)		
iii. U Other		
b. Check in the amount of \$enclosed		
c. Payment by credit card (Form PTO-2038 enclosed)  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit		
card information and authorization on PTO-2038.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
Signature fature Studies Name (Print/Type) Patricia Scaduto	Date Regi	Jun - 30 y 2009 stration No. 39,827
CERTIFICATE OF MAILING OR TRANSMISSION		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mall in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.		
Signature Statizer Studito		
Name (Print/Type) Patricia Scaduto  This collection of information is required by 37 CER 1.114. The information	Date	Jan 30, 2004

to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PAGE 2/10 \* RCVD AT 1/30/2009 5:54:29 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/35 \* DNIS:2738300 \* CSID:9894966354 \* DURATION (mm-ss):02-00

JAN 3 0 2009

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006, OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Panerwork Reduction Act of 1995, on persons are remitted to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). 10/517730 Application Number TRANSMIT Filing Date 08/DEC/2004 For FY 2005 First Named Inventor BLACKWOOD Examiner Name OJURONGBE, Olatunde S. Applicant claims small entity status. See 37 CFR 1.27 Art Unit TOTAL AMOUNT OF PAYMENT \$810.00 DC5018 PCT1 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Money Order Other (please identify): None Deposit Account Deposit Account Number: 04-1520 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fce(s) under 37 CFR 1.18 and 1.17 ✓ Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES** Small Entity **Small Entity** Small Entity **Application Type** Fee (S) Fee (\$) Fees Paid (\$) Fee (\$) Fee (5) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 200 Design 100 100 50 130 65 Plant 200 300 100 160 80 1.50 300 Reissue 150 500 250 600 300 Provisional 200 100 0 0 O 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total daims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP -HP = highest number of independent claims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets \_ (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fcc (no small entity discount) Other (e.g., late filing surcharge): <u>Request for Continued Examination (RCE)</u> \$810.00 SUBMITTED BY Registration No. Telephone 989-498-6925 Scaduls Signature 39,827 (Attorney/Agent) Patricia Scaduto Name (Print/Type

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdan, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.